

symposium of special diagnostic aids, of which the overall editor is C. Paul Hodgkinson, M.D.

In this section, the more recent and not so recent aids in making gynaecological diagnosis more accurately are described and reviewed.

It starts with a very fair review of the way of staging uterine cancer and inevitably proceeds to discussion of cytology, including more exotic methods of obtaining cytological specimens.

Culdocentesis and culdoscopy have small chapters.

There is an excellent summary of the indications and contraindications and dangers of hysterosalpingography and there are also good reviews of the value of X-ray pelvimetry and of soft tissue placentography together with a new technique of urethrocytograms.

The diagnosis of toxæmia of pregnancy is treated rather superficially.

The second half of the book is devoted to abnormal uterine bleeding under the editorship of John I. Brewer, M.D. The causes are reviewed and unusual conditions like bleeding in children are written about.

There is a very sensible chapter on menopausal and postmenopausal bleeding and another small one on the psychosomatic aspects of bleeding.

Altogether, this section maintains the high standard set by the previous books in the first year's volume.

## EAR, NOSE AND THROAT DYSFUNCTION DUE TO DEFICIENCIES AND IMBALANCES

By SAM E. ROBERTS, M.D. Pp. xxiii + 305, with 57 illustrations. Oxford: Blackwell Scientific Publications. 1957. 63s.

The basis of the book's *raison d'être*, and a wholly laudable one, is that many disorders in the field of otolaryngology are the localized manifestations of a constitutional disease.

The author has candidly stated that much in the book is founded on clinical observation and the results described are, in part, subjective. These deficiencies and imbalances are nutritional, electrolytic, hormonal, acid base and insulin sugar and the sub-clinical conditions thereof have not been helped and may have been impeded by available laboratory tests.

Many working hypotheses have been used by the author to support his views. The basis of all treatment throughout the book is the therapeutic test and is reinforced by many case reports—these are not wholly convincing. The correction of gonadal imbalance is a constant theme and would appear to contribute to many conditions such as vascular headache, Meniere's Disease, acoustic nerve and sinus dysfunctions.

The author says that he is not expecting total acceptance of his views, even anticipating vehement opposition.

This is a fair assessment.

P.A.

## SURGEON AT ARMS

By DANIEL PAUL. Pp. 227, with illustrations. London: William Heinemann Ltd. 1958. 16s.

Daniel Paul conceals the identity of an orthopaedic surgeon who as a member of the Parachute Field Ambulance was captured at Arnhem. After many adventures and frustrating delay he managed to escape back to the British line. Most of the story is concerned with his hiding with the Dutch Resistance, and interesting as this is, the Reviewer personally would have liked to hear more about the Arnhem Battle.

However, the book is an exciting story written about a man of obvious courage and determination and should have a wide appeal both to the general public and to doctors, particularly those who have served with Airborne Forces.

D.W.S.G.

## PSYCHIATRY IN THE BRITISH ARMY IN THE SECOND WORLD WAR

By R. H. AHRENFELDT. Pp. xv + 312. London: Routledge and Kegan Paul Ltd. 1958. 35s.

The most striking thing about this book is the diversity of function of the army psychiatrist which it describes. Many of the widely disparate duties can only be related to mental hygiene by stretching the imagination, and only two of the ten chapters describe traditional medical work in caring for and treating soldiers with psychiatric disabilities. The remainder of the book records the work of the psychiatrist in such unfamiliar fields as personnel selection, service discipline and morale, training, civil resettlement, and the like. This is not to negate the value of the book; on the contrary, it throws a new light on the contribution which psychiatry made to acute social problems in a time of national emergency, and so fills many of the gaps left by the more conventional medical histories of the war.

Looking back in retrospect and with the comprehensive overview provided by available documents and postwar surveys, much of this work, which was essentially on a trial-and-error basis, was perhaps less important than the author makes out. Few would certainly agree with the author that in officer selection and in the assessment of temperamental factors 'psychology is the handmaid of psychiatry.' The study of behaviour of normal individuals, is of course, Psychology's special province, and readers capable of differentiating these two disciplines will quickly realise that the major function of this book has been to put the case for Military Psychology; it is noteworthy that the psychiatrists who, in the author's opinion, made the most significant contributions to this aspect of service needs were in fact men who were better known in psychological circles than psychiatric ones. Dr. J. D. Sutherland, former President of the British Psychological Society, is perhaps the